

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER		19	124-01
FORMALITY REVIEW	TZ	50947	02/00/01
RESPONSE FORMALITY REVIEW	M.D	5095	02/30/01

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral)..... Canceled A Appeal
 ÷ Restricted O Objected

Claim	Date
Final Original 2/5/01	
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If more than 150 claims or 10 actions
 staple additional sheet here

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